



PTO/SB/21 (08-03)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/783,715
		Filing Date	February 19, 2004
		First Named Inventor	Staggs, Robert
		Art Unit	
Examiner Name		Not yet known	
Total Number of Pages in This Submission		Attorney Docket Number	020375-049800US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> Copy of one (1) cited reference Return Postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Townsend and Townsend and Crew LLP Melissa A. Haapala Reg. No. 47,622
Signature	
Date	May 13, 2004

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Nina L. McNeill		
Signature		Date	May 13, 2004



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Attorney Docket No.: 020375-049800US

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Alexandria, VA 22313-1450

On May 13, 2004

TOWNSEND and TOWNSEND and CREW LLP

By: Kira L. McNeill

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Robert Staggs

Application No.: 10/783,715

Filed: February 19, 2004

For: METHODS AND SYSTEMS FOR
PROVIDING PERSONALIZED
FREQUENTLY ASKED QUESTIONS

Examiner: Not yet known

Art Unit:

INFORMATION DISCLOSURE
STATEMENT UNDER 37 CFR §1.97 and
§1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The reference cited on attached form PTO/SB/08A and PTO/SB/08B is being called to the attention of the Examiner. A copy of the reference is enclosed. It is respectfully requested that the cited reference be expressly considered during the prosecution of this application, and the reference be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and reference cited is prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement.

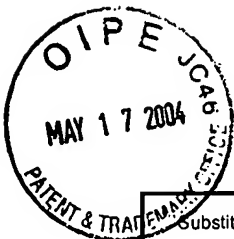
However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Melissa A. Haapala", written in a cursive style.

Melissa A. Haapala
Reg. No. 47,622

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INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)			Complete if Known		
			Application Number	10/783,715	
			Filing Date	February 19, 2004	
			First Named Inventor	Staggs, Robert	
			Art Unit		
			Examiner Name	Not yet known	
Sheet	1	of	1	Attorney Docket Number	020375-049800US

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			
	AA	US-			
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FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
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NON PATENT LITERATURE DOCUMENTS			
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Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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